



Retail Food Establishment Inspection Report

Floyd County Health Department
Telephone: 812-948-4726

X1060

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name New Albany Stadium #110			Telephone Number 805-925-9030		Date of Inspection (mm/dd/yr) 1/10/20		PERMIT # 19-215	
Establishment Address (number and street, city, state, zip code) 300 Professional Ct. New Albany, IN 47150			812-941-9050					
Owner Great Escape Theaters of New Albany, LLC			Purpose: Routine		Follow-up No		Release Date 10 days	
Owner's Address 101 E. Blount Ave Knoxville, TN 37920			2. Follow-up		Summary of Violations:			
Person in Charge Danica McAtee			3. Complaint		C <input checked="" type="checkbox"/> NC 5 R <input checked="" type="checkbox"/>			
Responsible Person's E-mail			4. Pre-Operational		Menu Type (See back of page)			
Certified Food Manager N/A - Menu Type 1			5. Temporary		1 <input checked="" type="checkbox"/> 2 3 4 5			
			6. HACCP					
			7. Other (list)					
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"								
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"								
Section#	C/NC	R	Narrative				To Be Corrected By	
177	NC		Observed soda syrup boxes stored on BOH floor				1 week	
245	NC		Observed sanitizing rags outside of sanitizer / allowed to dry				Retrain staff	
324	NC		Observed 3-comp hoses to be too long				1 week	
547	NC		Observed hand towel dispenser without power				Today	
430	NC		Observed stained ceiling tiles in party room				1 week	
Received by (name and title printed): Oleason McAtee Deputy General Manager								
Inspected by (name and title printed): A.J. Ingram (EHS)								
Received by (signature): 								
Inspected by (signature): 								
cc:			cc:			cc:		